

Greater Nashua Medical Reserve Corps Nashua NH Division of Public Health

Credentialing
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## New Hampshire

- No Seat belt law
- No Helmet law
- State Liquor stores on our highways and borders
- No sales tax
- No Income tax

State motto

Live Free of Die

## Credentialing

- *credential :noun*: a document attesting to the truth of certain stated facts <u>certificate</u>
- certification
- credentials
- Document
- Papers
- written document
- <u>card</u>
- Diploma
- identity card
- sheepskin

 OK so we are going to credential you to face known and unknown threats, at known and unknown places and times, with known and unknown skills

## MRC Credentialing

- Decide what you are going to want people do
- Some basics like cpr
- ?BDLS? ADLSATLS
- etc

 Credentialing: A major headache for every medical practice administrator

 Credentialing and verification a time consuming, expensive enterprise especially in volunteer organizations

# Medical Credentialing

- Minimum of 2-3 hours per credentialing application
- Take 6 months for processing
- May have as many as 15 applications or more for each practitioner

# Credentialing: Why?

- Liability
- Safety
- Skills
- Experience
- Identification
- Security
- Interests
- Legitimize enterprise

- Identify needs
- Competency
- Character/ethics
- Interoperability
- Standardization
- more

## Competency

Basing the credential on scientifically and legally defensible competencies that are linked to job responsibilities....

"Few health professions that are credentialed have data related to credentialings' impact on practitioner competence, organizations or other outcomes"

American journal of public health management and practice Vol 7 iss4 p 38

# Sure ways to make a physicians day

- You have just been appointed to the credentials committee
- You are due to meet with the Joint Commission for Accreditation of Hospitals(JCAHO)
- You need to fill out your credentialing applications

 The difference between leadership and whining is what you do about it

# Learning From a Failed Grant Application

- No State Volunteer coordination or oversight for disasters
- No recognition of MRC
- No interest group connection
- No mechanism to promote common interests and opportunities
- Confusion of state agencies

#### Lessons learned/actions taken

- State Citizen Corps Council
- Recognition by state as a resource
- Clarified NH state process and linking agencies
- Identified interest groups
- Brought them together
- Identified key issues and opportunities

## Participants

- Northern New England MMRS
- New Hampshire Hospital Association
- DHHS
- NH Medical Society
- NH Office of Emergency Management

### NH Effort

#### Assumptions:

- Need statewide and ideally regional system
- Credentialing and identification are closely related
- Leverage resources, partners and interests
- Credentialing, training, and certification should be interoperable and standard

## Advantages

- Avoid cost of development and implementation of multiple systems
- Create interoperability
- Create basic standards
- Integrate within local, state and regional disaster system
- Create joint opportunities
- Leverage resources

- There are no secrets to success. It is the result of preparation, hard work, and learning from failure.
- Colin Powell

#### Nashua MRC

- Partner or leverage hospital credentialing
- Temporary credentialing
- Paper/electronic database
- Eventual linkage to MMRS of Northern New England Credentialing and ID system

### JCAHO December 2001

 Make provisions for quickly evaluating essential credentials of any temporary or volunteer professional staff...

## Joint Commission

- March 12 2003 recommendations
- ....fund and facilitate the creation of a credentialing database to support a emergency volunteer system for health care professionals.

# Joint Commission of Accreditation of Hospitals

- Standard EC .2.9.1 effective 1/1/03
- ....the information and skills required to perform assigned duties during emergencies
- Testing includes ...at least one drill yearly that includes an influx of volunteers

#### Lessons

- Hospitals are expert at credentialing, use that expertise
- If someone offers support to make your life easier use it
- Make it simpler
- Find partners

## **Progress**

• Seize the moment of excited curiosity on any subject to solve your doubts; for if you let it pass, the desire may never return, and you may remain in ignorance. William Wirt (1772 - 1834)

- Emergency System for Advance Registration of Volunteer Healthcare Personnel
- Health Resources and Services
   Administration November 2003

- The use of credentialed health care volunteers in an emergency or mass casualty event
- ...inability to verify physician's identity or basic licensing or credentialing information
- …loss of communications that can provide credentialing information

- Limited resources to perform verification of education, skills, training, or competencies due to an emergency
- Jurisdiction over licenses resides at the state level
- Various agencies and institutions grant certifications resulting in different standards and processes for credentialing and assurance of licensure

- Need for system that will support effective and efficient identification of qualified volunteer healthcare personnel
- There is neither an integrated system that can be accessed containing relevant, verified information about a practitioners education, license and competency nor a widely available model template that can be made available to states to facilitate this type of integrated model.

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